

County: Brown
 WESTERN VILLAGE
 1640 SHAWANO AVENUE
 GREEN BAY 54303 Phone: (920) 499-5177
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/00): 124
 Total Licensed Bed Capacity (12/31/00): 125
 Number of Residents on 12/31/00: 117

Facility ID: 3770

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Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF?
 Title 18 (Medicare) Certified?
 Average Daily Census:

Corporation
 Skilled
 No
 Yes
 119

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	31.6
Supp. Home Care-Personal Care	No					1 - 4 Years	47.0
Supp. Home Care-Household Services	No	Developmental Disabilities	6.0	Under 65	12.8	More Than 4 Years	21.4
Day Services	No	Mental Illness (Org./Psy)	10.3	65 - 74	12.0		
Respite Care	No	Mental Illness (Other)	2.6	75 - 84	35.0		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	35.0	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.1	Full-Time Equivalent	
Congregate Meals	No	Cancer	1.7			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	0.9		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	29.9	65 & Over	87.2		
Transportation	No	Cerebrovascular	12.8			RNs	6.5
Referral Service	No	Diabetes	1.7	Sex	%	LPNs	11.1
Other Services	No	Respiratory	6.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	28.2	Male	38.5	Aides & Orderlies	
Mentally Ill	No			Female	61.5		34.8
Provide Day Programming for			100.0				
Developmentally Disabled	Yes				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay			Managed Care			Total	Percent Of All Residents
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate		
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	10	100.0	\$173.00	66	79.5	\$85.75	0	0.0	\$0.00	21	91.3	\$146.00	1	100.0	\$325.00	98	83.8%
Intermediate	---	---	---	10	12.0	\$71.20	0	0.0	\$0.00	2	8.7	\$146.00	0	0.0	\$0.00	12	10.3%
Limited Care	---	---	---	1	1.2	\$61.50	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	0.9%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	6	7.2	\$126.98	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	6	5.1%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	10	100.0		83	100.0		0	0.0		23	100.0		1	100.0		117	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	2.1	Bathing	2.6	67.5	29.9	117
Private Home/With Home Health	3.5	Dressing	16.2	74.4	9.4	117
Other Nursing Homes	0.7	Transferring	32.5	50.4	17.1	117
Acute Care Hospitals	92.9	Toilet Use	27.4	49.6	23.1	117
Psych. Hosp. -MR/DD Facilities	0.0	Eating	52.1	40.2	7.7	117
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.7	Continence		%	Special Treatments	%
Total Number of Admissions	141	Indwelling Or External Catheter	5.1		Receiving Respiratory Care	6.8
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	59.8		Receiving Tracheostomy Care	0.0
Private Home/No Home Health	18.9	Occ/Freq. Incontinent of Bowel	45.3		Receiving Suctioning	0.0
Private Home/With Home Health	15.4	Mobility			Receiving Ostomy Care	0.9
Other Nursing Homes	0.7	Physically Restrained	4.3		Receiving Tube Feeding	1.7
Acute Care Hospitals	7.7				Receiving Mechanically Altered Diets	25.6
Psych. Hosp. -MR/DD Facilities	0.0	Skin Care			Other Resident Characteristics	
Rehabilitation Hospitals	0.0	With Pressure Sores	5.1		Have Advance Directives	81.2
Other Locations	11.9	With Rashes	1.7		Medications	
Deaths	45.5				Receiving Psychoactive Drugs	59.8
Total Number of Discharges (Including Deaths)	143				*****	

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	Ownership:		Bed Size:		Licensure:		All	
	This Facility	Peer Group	100-199	Peer Group	Skilled	Peer Group	Facilities	Ratio
	%	%	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.2	82.5	1.15	83.6	1.14	84.1	1.13	84.5
Current Residents from In-County	86.3	83.3	1.04	86.1	1.00	83.5	1.03	77.5
Admissions from In-County, Still Residing	21.3	19.9	1.07	22.5	0.95	22.9	0.93	21.5
Admissions/Average Daily Census	118.5	170.1	0.70	144.6	0.82	134.3	0.88	124.3
Discharges/Average Daily Census	120.2	170.7	0.70	146.1	0.82	135.6	0.89	126.1
Discharges To Private Residence/Average Daily Census	41.2	70.8	0.58	56.1	0.73	53.6	0.77	49.9
Residents Receiving Skilled Care	83.8	91.2	0.92	91.5	0.92	90.1	0.93	83.3
Residents Aged 65 and Older	87.2	93.7	0.93	92.9	0.94	92.7	0.94	87.7
Title 19 (Medicaid) Funded Residents	70.9	62.6	1.13	63.9	1.11	63.5	1.12	69.0
Private Pay Funded Residents	19.7	24.4	0.81	24.5	0.80	27.0	0.73	22.6
Developmentally Disabled Residents	6.0	0.8	7.76	0.8	7.27	1.3	4.76	7.6
Mentally Ill Residents	12.8	30.6	0.42	36.0	0.36	37.3	0.34	33.3
General Medical Service Residents	28.2	19.9	1.42	21.1	1.34	19.2	1.47	18.4
Impaired ADL (Mean)	46.0	48.6	0.95	50.5	0.91	49.7	0.93	49.4
Psychological Problems	59.8	47.2	1.27	49.4	1.21	50.7	1.18	50.1
Nursing Care Required (Mean)	5.2	6.2	0.85	6.2	0.85	6.4	0.81	7.2